

Entered - 11/19/99 - sb
CL99L0763 - DIANNE C. MITCHELL

CLAIM OF: **ADRIAN HAYWOOD,**
through his attorney,
John C. Forbes, Jr.
1355 Peachtree Street
Suite 1000
Atlanta, Georgia 30309

00-R -1715

For damages alleged to have been sustained as a result of a vehicular accident on October 26, 1999 at Central Avenue and Mitchell Street.

BY PUBLIC SAFETY AND
LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **ADRIAN HAYWOOD, through his attorney, John C. Forbes, Jr.** the sum of **\$1,000.00** in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular accident on October 26, 1999 at Central Avenue and Mitchell Street as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD
CITY ATTORNEY

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

Mitchell

COUNCIL OF THE CITY OF ATLANTA

MUNICIPAL CLERK

City Hall

55 Trinity Avenue, S.W.

Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date: 11-11-99

ENTERED - 11-19-99 - SB

99L0763 - DIANNE MITCHELL

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ Pending property and/or \$ Pending bodily injury for which I contend the City is liable.

1. Date of incident: 10-26-99 2. Time of Incident: 8:45 PM 3. Police called: ✓
(month/day/year) Yes No
4. Location of incident (including street address): Central E Mitchell -- Atlanta Georgia
5. Name of your insurance company: USA A Policy No. 2037402
6. State what and how incident occurred: Mr. Haywood's 83 Buick was East Bound on Mitchell,
going thru a green light.. broadside by police cruiser on the pass
side of 83 Buick -- No Sirens for Police Cruiser

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: 83 Buick 1983 UNK Adrian Haywood
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: 93 FORD Crown Victoria City of Atlanta
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: ON Police Report
(Name) (Address) (Telephone Number)

10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Adrian Haywood as ^{claims} ~~report~~ adjuster
Signature of Claimant for Adrian Haywood

COMM TEAM
RECEIVED

Adrian Haywood
(Print Claimant's Name)

336 Nicole Court
(Address)

A Jonesboro GA 30238-3001
(City, State and Zip Code)

NOV 09 1999

770 478 1339
(Work Number)
HOME

404 241 5000
(Home Number)
WORK